

161741408



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**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: BUXFER INC.

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 407 ACALANES DR. #16, SUNNYVALE CA 94086

Name of Agent Designated to Receive
Notification of Claimed Infringement: SHASHANK PANDIT

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):
407 ACALANES DR. #16, SUNNYVALE CA 94086

Telephone Number of Designated Agent: 412-527-6877

Facsimile Number of Designated Agent: 412-527-6877

Email Address of Designated Agent: shashank@buxfer.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 27 JULY 2007

Typed or Printed Name and Title: SHASHANK PANDIT, TREASURER

SCANNED 08 16 - 2007

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.

RECEIVED
AUG 02 2007
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